Prescription Drug Resources

This fact sheet outlines strategies and programs that may help you save on your prescription drug costs. If you have a Medicare Part D plan or Medicare Advantage prescription drug (MA-PD) plan, decreasing costs may keep you out of the coverage gap, also called the “donut hole.” This is the period during which you are responsible for paying a large percentage of your drug costs.

Before 2011, beneficiaries had to pay 100% of their drug costs in the coverage gap. Due to the Affordable Care Act (commonly called Obamacare), beneficiary cost-sharing in the coverage gap will decrease over several years until 2020 when beneficiaries will pay only 25% of drug costs in the gap. In 2018, a beneficiary in the "donut hole" pays 35% of brand name drug costs and 44% of generic drug costs.

If you do enter the coverage gap but are unlikely to spend a total of $5,000 out of pocket before the end of the year to receive catastrophic coverage, these cost-saving strategies may help. **In general, these programs do not coordinate with Part D plans and what you pay may not count towards your true-out-of-pocket (TrOOP) expenses.** (Your TrOOP expenses are copays or coinsurance you pay for covered Part D drugs and the annual deductible.) See our online Medicare Topics sections on Prescription Drugs at cahealthadvocates.org.

Cost Saving Strategies

- Review your Medicare Part D plan yearly to make sure it provides the most comprehensive coverage for your drugs at the lowest cost. Call your local Health Insurance Counseling and Advocacy Program (HICAP) at 1-800-434-0222 or Medicare at 1-800-MEDICARE (1-800-633-4227) to ask for assistance comparing plans, or use the Medicare Plan Finder on the Medicare website at medicare.gov. The Annual Election Period for changing Part D plans is October 15 – December 7.
- Talk to your doctor about switching to generic drugs or other less expensive brand drugs. The Consumer Reports Best Buy Drugs (CRBBDs) website provides reports on various drug categories. (Categories refer to drugs in the same class that are used to treat a specific condition or illness such as high blood pressure, high cholesterol, heartburn, or depression). Each report reviews both the scientific evidence on the drugs’ effectiveness and their prices. It then analyzes and compares the drugs within that specific category to come up with recommendations on the “best buy drugs” based on drug effectiveness, safety, and cost. Visit CRBBDs online at crbestbuydrugs.org.
- Ask your doctor for free samples.
- Find out if using your plan’s mail-order pharmacy would cost less. Please note that some plans offer some brand name drugs at a retail pharmacy only and not through mail-order. Call your plan for details.
- Apply for government or private programs that might reduce your drug costs. (See below.)
- Contact Patient Assistance Programs (PAPs) listed below that cover your drugs.
- Check the prices for your prescription(s) at several pharmacies. Pharmacies in your plan’s network should have lower prices than at out-of-network pharmacies. However, some pharmacies not in any plan’s network may have lower drug prices. (E.g. Costco’s pharmacies may have lower prices. You do not need to be a Costco member to use the pharmacies.) Among your plan’s network...
pharmacies, some offer lower cost-sharing than other network pharmacies.


**Alert:** Many internet pharmacies sell drugs online at discounted prices. Some online pharmacies operate illegally and may supply counterfeit or fake drugs that have too little or no active ingredients or contain dangerous contaminants. Please note that importing prescription drugs that are not approved by the US Food & Drug Administration into the U.S. is illegal.

If you are considering ordering from an Internet pharmacy, please take precautions. Go to [www.safe.pharmacy](http://www.safe.pharmacy) to learn why buying drugs online is risky, how to spot a rogue online pharmacy, and where to find an accredited pharmacy. Please note that payment to the online pharmacy does not apply toward your Medicare Part D TrOOP expenses.

**Government Programs**

**Medicare Low-Income Subsidy Program** (also known as “Extra Help”)
The low-income subsidy (LIS) assists Medicare beneficiaries with limited incomes to pay for their Medicare Part D plan premium and deductible. Those who qualify for the LIS may pay $0 premium and deductible and low copayments. See our online Medicare topics sections on Prescription Drugs and click on [Extra Help with Part D Costs](http://www.cahealthadvocates.org) in the Prescription Drugs section of our website at [www.cahealthadvocates.org](http://www.cahealthadvocates.org).

**Medi-Cal**
People on Medicare and Medi-Cal pay no more than $8.35 per prescription for Medicare covered drugs. (See our online Medicare Topics section on Prescription Drugs and click on [Extra Help with Part D Costs](http://www.cahealthadvocates.org).) Medi-Cal covers some drugs not covered by Part D. To apply for Medi-Cal, call your local County Department of Health Care Services to start the application process over the phone. More information is on the web at [www.dhcs.ca.gov/services/medicare/Pages/default.aspx](http://www.dhcs.ca.gov/services/medicare/Pages/default.aspx).

**California Prescription Drug Discount Program**
At Medi-Cal participating pharmacies, you can get prescription drugs at the Medi-Cal rate plus a 15-cent processing fee. This rate may be lower than the Part D rate. **Payments may not apply toward your Part D cost-sharing. This program should not be used as a substitute for Medicare Part D.** To receive benefits, show your Medicare card and the prescription at Medi-Cal participating pharmacies. More information is on the web at [http://www.dhcs.ca.gov/provgovpart/pharmacy/Documents/SB393Inst.pdf](http://www.dhcs.ca.gov/provgovpart/pharmacy/Documents/SB393Inst.pdf).

**Department of Veteran Affairs (VA)**
If you have the VA’s Medical Benefits Package, it includes a prescription drug benefit that is creditable (i.e. as good as or better than the standard Medicare Part D benefit.) A VA provider must prescribe the drugs. An eligible veteran can get a 30-day supply at VA pharmacies and the copayment amount depends on what “priority group” the veteran is in. Veterans who have the VA Medical Benefits Package may also enroll in a Medicare Part D plan. They may save money by filling some drugs through the VA program and some through the Part D plan. Veterans may also choose to have only VA coverage and enroll in a Medicare Part D plan later. Since the VA prescription drug coverage is creditable, the late enrollment penalty for Part D is waived. For more information about the VA Medical Benefits Package, contact 1-877-222-8387 or [http://www.va.gov/healthbenefits](http://www.va.gov/healthbenefits). Also see our Medicare Topics section on Other Health Insurance and click on the link for Veterans Affairs Benefits.

**TRICARE for Life (TFL)**
Active and retired military service members and their spouses may be eligible for TRICARE, which is part of the Military Health System. TRICARE members who turned 65 after April 1,
2001, must enroll in Medicare Part B. TriCare for Life (TFL) is the program for TriCare members enrolled in Medicare. Medicare is the primary payer and TFL the secondary payer for benefits covered by both Medicare and TFL.

TFL offers creditable prescription drug coverage. Thus, if you have TFL, you may decide not to enroll in a Medicare Part D plan. For more information, call TFL at 1-866-773-0404, or visit the website at tricare4u.com. You can also see our Medicare Topics section on Other Health Insurance and visit the page “TriCare for Life.”

**Patient Assistance Programs**

Many pharmaceutical companies offer Patient Assistance Programs (PAPs) that provide free or low-cost drugs to qualified individuals. Each program has its own eligibility criteria and application process. Some provide drugs only if the drugs are not on your Medicare Part D plan's formulary, or if you are in the coverage gap, or not enrolled in a Medicare Part D plan.

**Medicare** can tell you which PAP covers your drug, who qualifies and how to apply. Call 1-800-MEDICARE (1-800-633-4227) and ask for assistance, or visit medicare.gov/pharmaceutical-assistance-program/index.aspx.

**Note:** If a PAP pays for your drugs, their payment will not count toward your TrOOP expenses in your Medicare Part D plan.

**Additional Information**

The websites listed below contain searchable databases with information on prescription drug resources and financial assistance with prescription drug costs. Many specifically help you find patient assistance programs (PAPs).

**pparx.org** – Partnership for Prescription Assistance offers a single point of access to more than 475 public and private patient assistance programs, including more than 200 programs offered by pharmaceutical companies. You can also access the Partnership for Prescription Assistance by phone at 1-888-4PPA-NOW (1-888-477-2669), sponsored by PhRMA (the Pharmaceutical Researchers and Manufacturers of America).

**rxassist.org** – RxAssist offers a comprehensive database of patient assistance programs, as well as practical tools, news, articles and up-to-date information on how to access assistance from over 150 companies and hundreds of medications. Searches can be performed on several variables: company name, brand name drug, generic name, and drug therapy class.

**rxhope.com** – The Rx Hope website allows patients and their providers to apply for patient assistance programs offered by hundreds of manufacturers, and to find information on programs offered by the state and federal governments, as well as by pharmaceutical companies. The Patient Assistance Information section gives information about particular products or companies.

**needymeds.org** – The NeedyMeds website allows you to enter your medication to find patient assistance programs for that specific medication. It has an alphabetical list of approximately 4,400 prescription drugs. You can also reach them by phone at 1-800-503-6897.

**mygooddays.org** -- Good Days is a non-profit organization that assists patients with chronic disease, cancer and other life-altering conditions obtain certain expensive, life-saving medications they need. Patients must meet certain income qualifications and have private insurance or a Medicare Part D plan. You can also reach them by phone at 1-877-968-7233.

**benefitscheckup.org** – Benefits Check Up is a service of the National Council on Aging. It has an online screening tool that searches over 2,000 public and private benefits programs. Many of these programs can help certain qualified people ages 55 and older pay for some costs of prescription drugs, health care, utilities, and other essential items or services.

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This fact sheet contains general information. If you would like to discuss your specific situation, call the Health Insurance Counseling and Advocacy Program (HICAP). HICAP provides free and objective information and counseling on Medicare and can help you understand your specific rights and health care options. You can call 1-800-434-0222 to make an appointment at the HICAP office nearest you.

**Note:** Online access to all 33 CHA fact sheets on Medicare and related topics is available for an annual subscription. See cahealthadvocates.org/facts.html.